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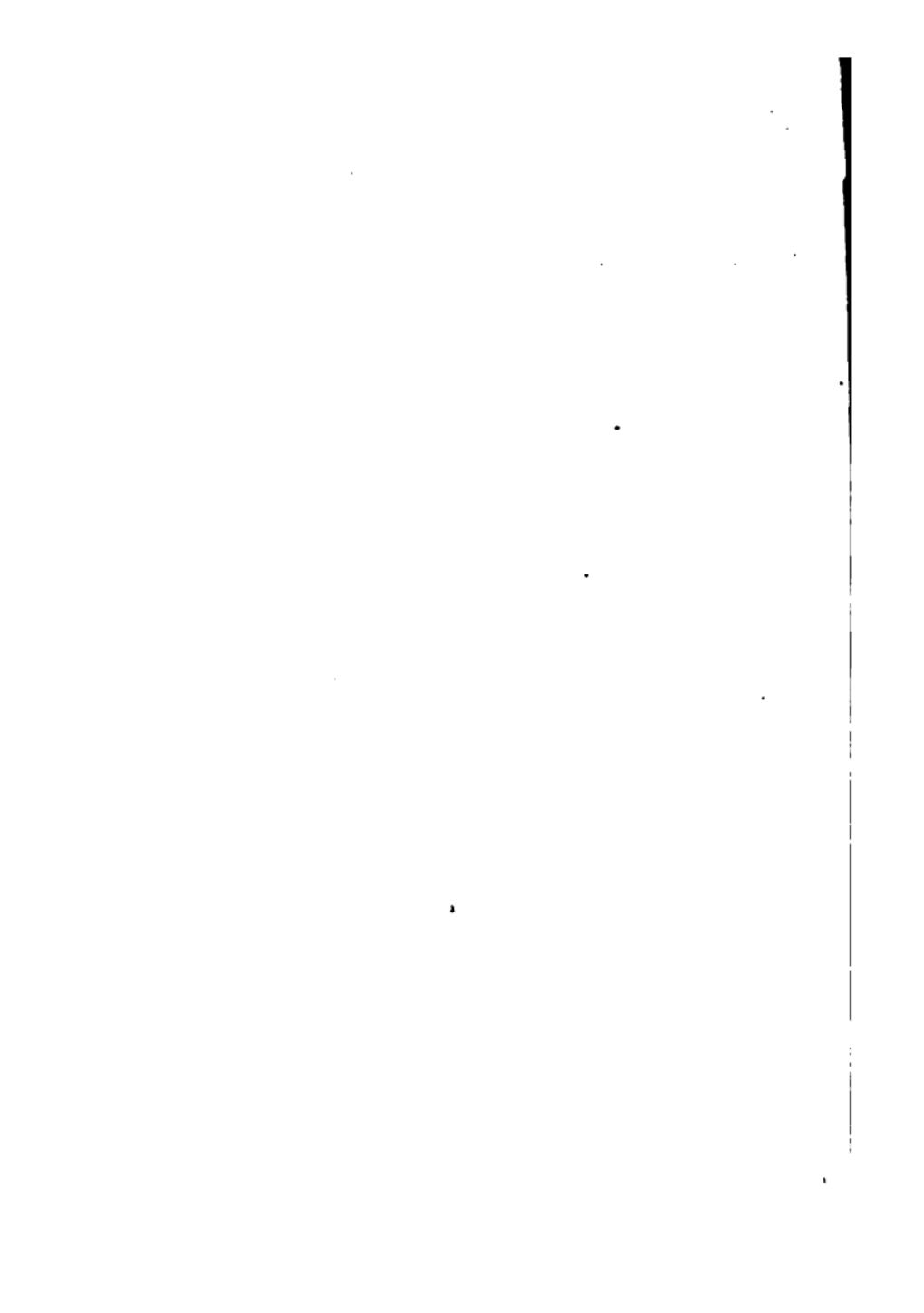
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INFORMATION
ON
THE TEETH.

BY
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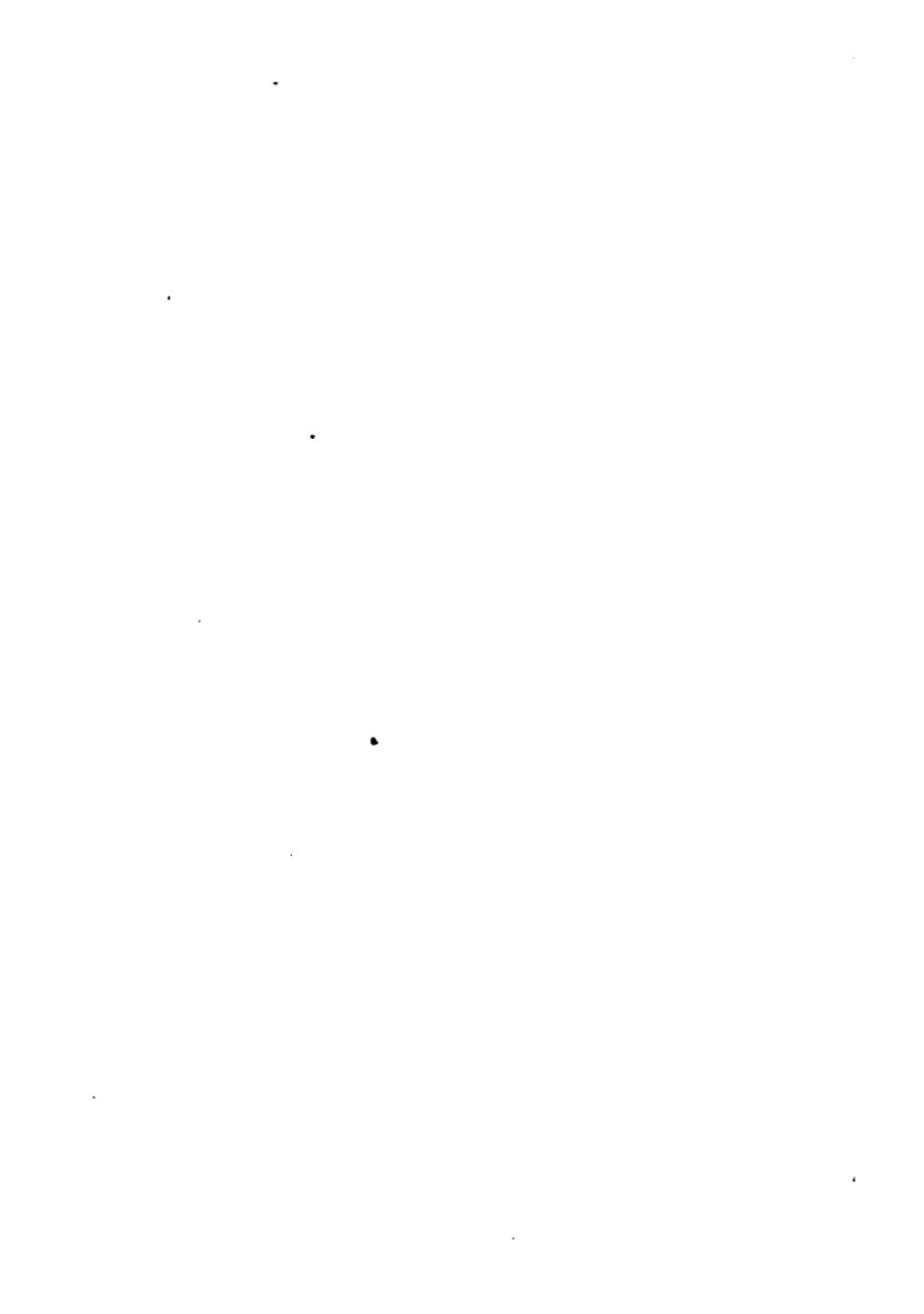
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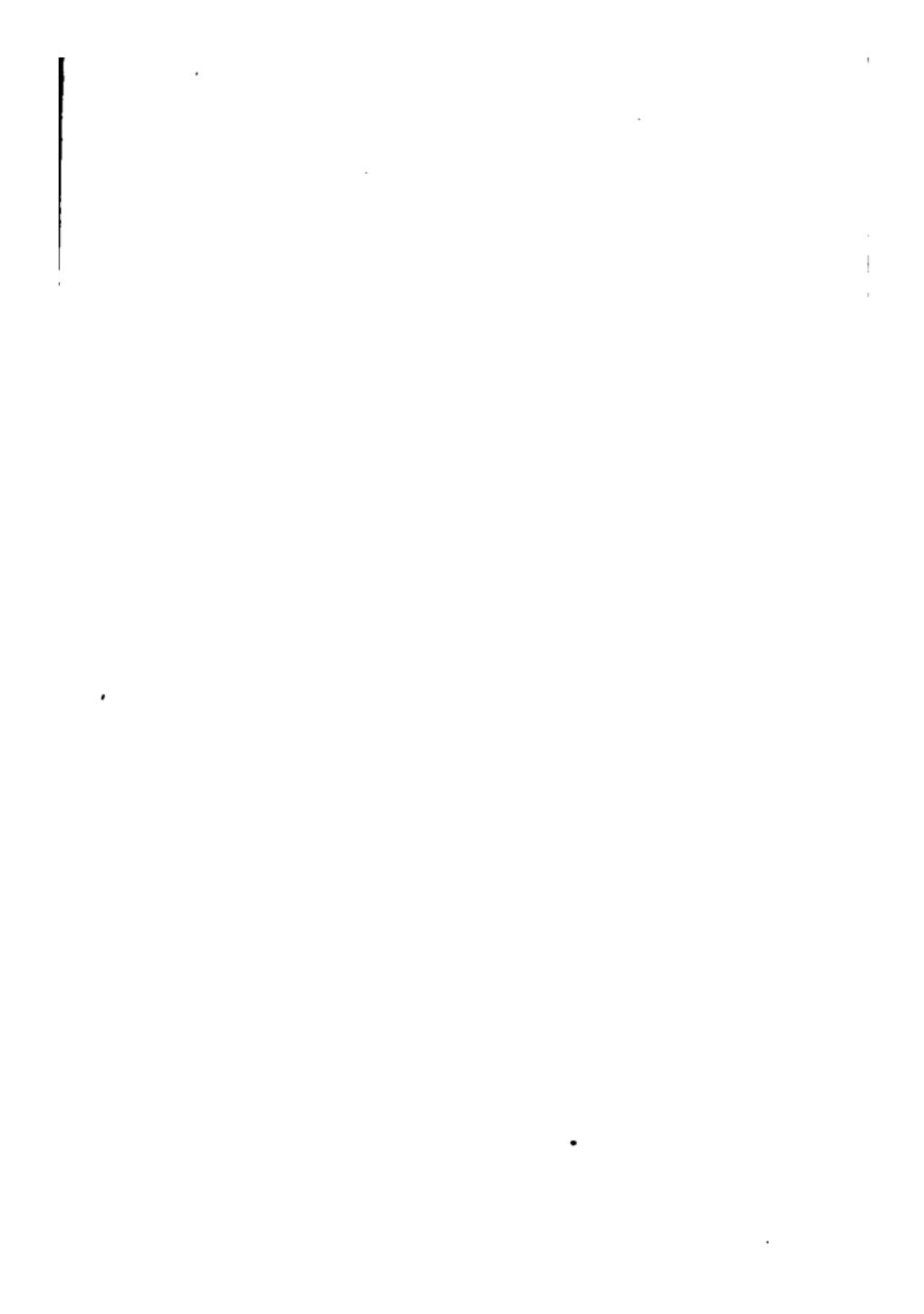


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INFORMATION ON THE TEETH.

So many are the circumstances relating to the growth and preservation of the Teeth, which have important connexions with health, comfort, and beauty of appearance, that it is difficult to conceive that any persons should be otherwise than anxious for clear and sufficient information that may be conducive to these ends: yet so numerous are prevalent errors and

malpractices in the care of the Teeth —or rather their neglect—that it is necessary to set out, in a manual like the present, with some observations on—

THE BENEFITS OF A GOOD SET OF TEETH.

THEIR principal advantage is found in their influence, directly or indirectly, upon the *health*. To persons unacquainted with the marvellous structure of the human frame, and the intimate relation existing between all its members, this statement may appear

somewhat strange and improbable—experience, however, declares it to be strictly correct.

The reader is well aware that the body requires constant nourishment; but it is equally true that our food, to afford nutrition, must be thoroughly masticated, and mingled with the saliva, *before* it passes into the stomach, in order that an easy digestion may follow.*

* Digestion consists in reducing food to chyme—that is, a softened mass, from which chyle, a milky fluid, is prepared: this is absorbed by the lacteal vessels, by which it is conveyed into the circulation, assimilated into blood, and converted into nutriment.

Now, it must be evident that if any of the teeth are unsound or lost, this preliminary and indispensable process cannot be properly and perfectly performed: hence arises, as a natural consequence, dyspepsia, or indigestion, with its numerous concomitant evils. The disagreeable sensations after an ill-masticated meal sufficiently attest the validity of these remarks.

Again: a good set of teeth is essentially requisite to the *modulation of the voice*, and a *distinct enunciation*, not less so than the tongue and lips, which in talking act

in *unison* with them. This may be proved by pronouncing the letters *s*, *z*, and words commencing with *th*, such as "*that*," "*therefore*." In so doing, the tongue will be found to vibrate against the teeth, the lips modulate the sound and give it expression. The contrast is very manifest when similar words are spoken by persons who have partially or wholly lost their teeth.

Lastly: a good set of teeth *materially improves the personal appearance*. The absence even of one front tooth destroys the symmetry and

beauty of the mouth; but when several are lost the disfigurement is very great: the length of the face is considerably diminished, the chin and nose approximate, the cheeks fall in, and the skin becomes furrowed, presenting an appearance of age and deformity—all which consequences are prejudicial both to comeliness and comfort.

Having thus described the benefits of a good set of teeth, I will next give

DIRECTIONS FOR OBTAINING THEM:

and will begin by advising parents and guardians to bestow every care and attention upon children's teeth, and see that they acquire an early habit of regularly *cleaning them, night and morning*, with a soft brush and water—(tooth-powder is not necessary)—for, let it be remembered, that to the preservation and healthy condition of the teeth of the *first* set is to be attributed, to a considerable extent, the right develop-

ment of those that succeed them.

Again: never dislodge, or suffer to be extracted *prematurely* any of the teeth of the *first* set; because on their retaining their allotted positions till the *proper* time arrives for their removal will greatly depend the good arrangement of the teeth of the second set, which in due time occupy the places of them all. Therefore, whenever any of the teeth of the first set become decayed and painful, put into the cavity a piece of wool, dipped in camphorated or other spirit, administering simultaneously a slight aperient.

If these means be inefficient, consult your dentist, who will prescribe such remedies as he considers most judicious.

Lastly: at the important period of *exchanging* the teeth of the first set for those of the second, (which usually commences about the sixth year,) the child's mouth requires *periodical inspection*; (about every six months.) Under favourable circumstances, the teeth of the first set gradually loosen, and are ejected by the protrusion of their successors through the gums; if, however, this does not take place, but,

instead, the teeth of the second set penetrate the gums, either *in front of*, or *behind* their predecessors; then, professional assistance without delay should be obtained, to *prevent* any permanent irregularity in their arrangement. Nature sometimes completes this intricate and interesting process of *Transition*, unaided, and it is *only* when she is incapable of doing so, that professional interference is imperatively necessary. But, should these desirable precautions have been neglected, and *irregularity* have occurred, it may still be completely

counteracted, even in its worst form, by means of mechanical contrivances, which are adapted to, and worn in, the mouth for a short time, without pain or inconvenience to the wearer.

The preceding directions are available chiefly in early life. My readers, however, whether they possess a good set of teeth or otherwise, will be desirous to have

RULES FOR THEIR PRESERVATION.

THE most important is, always to keep them in a *perfectly clean* state ; in order to do this, they should be well

brushed inside and out, and on the grinding surface, night and morning, at least, and if after each meal, so much the better. The tooth-brush must not be too broad nor too hard; it should be used in a *vertical* direction, as well as across the surface of the Teeth, so that the bristles may penetrate the interstices, wherein particles of food are very likely to remain. The water for rinsing the mouth must never be too cold.

Caution is necessary in the *choice of tooth-powders*; many being sold which contain tartaric and other acids,

making the teeth look very white for a time, but soon causing them to discolour, turn black, and eventually destroying them. Tooth-powders ought to contain only cleansing and tonic ingredients—such as prepared chalk, combined with camphor, or prepared chalk, with myrrh, bark, a small quantity of pulverized orris root, and cuttle-fish ; these mixed together may be safely used, as also may equal parts of myrrh, bark, orris root, and gum mastich.

In reference to *tinctures*, the same caution must be exercised. Tincture

of myrrh, bark, camphorated spirit, and eau de Cologne, either together or separately, may be used with advantage to the teeth and gums, by putting a few drops on the brush, or in the water for rinsing the mouth. Neither tooth-powder nor tincture is necessary more than once a day. Such as the author recommends can be obtained at his residence, ready prepared.

Another valuable rule for the preservation of the teeth, is to *have them examined by the dentist periodically*, (about every six months.) He is thus able to detect the *commencement* of

disease, and arrest its insidious progress, simply by removing the decay from the cavity, and repairing the loss of substance in the tooth, with a stopping material, so efficient that it *entirely* precludes all further extension of disease. This can be done without occasioning the slightest pain.

Many persons unwisely postpone having their teeth attended to, until distracting tooth-ache actually compels them. It is a pity that they should thus needlessly inflict upon themselves so much suffering, when it may be totally avoided by following the advice

just given; for it should always be borne in mind, that the most favourable time for having teeth *stopped*, both in reference to the patient and the operation itself, is *before* they become painful.

Again, it is of more consequence than is generally supposed, to *have artificial teeth inserted in the places of those that are lost*; and this should be done as soon after as circumstances will permit.

Experience proves, that if teeth are unsupported on either side, they invariably depart from their natural posi-

tion; and thus, in addition to having their masticatory powers more heavily taxed since the loss of their fellows, they inevitably loosen speedily, and either drop out, or are so troublesome and painful as to require extraction.

It is right here to mention, that all *acid* and *mercurial* medicines should be taken into the mouth, through a glass tube, so as to prevent them coming in contact with the teeth and gums; which should afterwards be well brushed, having previously mixed with the water for rinsing the mouth a small quantity of carbonate of soda,

to act as a neutralizer.

Moreover, a *quill toothpick* is the *only* kind that can be applied to the teeth with impunity.

Thus, it will be seen that the rules for the preservation of the teeth are few and simple; if they be but fairly tried and practised, the result will prove most satisfactory.

I will now pass on to speak of—

TOOTH-ACHE, ITS SPEEDY AND
PERMANENT CURE;

and, in order that my readers may more fully and clearly understand its

nature, and the method of cure, I will first briefly describe the characteristics of the organs in which it occurs.

Every tooth consists of three parts —viz, *the crown*, which is that portion left *uncovered* by the gums, when healthy; *the neck*, which is continuous with the crown, and embraced by the *edge* of the gums; and *the root*, which is a continuation of the neck, gradually diminishing to the extremity, and *enclosed* in its alveolus or socket, in which it is firmly retained.

Dentine, or *ivory*, constitutes the bulk of the tooth; the crown is coated

with *enamel* of variable thickness, as is also the root with *cementum*, or *cement*. In the centre of each tooth is a small canal or cavity, partaking of its *longitudinal* shape, and differing in size, according to the age, and class of tooth; it is very minute at the end of the root, but widens by degrees until it terminates at the crown; although so small, yet there pass through it, a nerve, to supply sensation; an artery, to convey blood for nutrition; and a vein, to return the impure blood, which, being connected with larger ones of the head, and these again inter-

communicating with others in different parts of the body, account for the *sympathetic* pains which so frequently accompany tooth-ache.

Tooth-ache may be divided into two kinds—the one is occasioned by *exposure of the dental pulp, or nerve,* as it is more commonly called, and creates most violent pain, of a sharp, darting character. It may sometimes be temporarily relieved, by placing in the *cavity* of the decayed tooth a piece of wool dipped in camphorated spirit, or creosote; at others, ice, or iced water, held in the mouth, affords

ease. These and several other remedies have been found successful; yet, after all, they are but *palliatives*, and as long as the tooth continues in a defective state, so long will the paroxysms recur; a *speedy and permanent cure* can be performed by the dentist only, and in the following manner:—

The cavity in the tooth is gently dried, and an *anodyne* carefully applied to the exposed nerve, with which it remains in contact for a few hours; in the interim, an *eschar*, or *crust*, is formed over its surface by the anodyne,

which *thus* thoroughly protects it from all further irritation; every particle of decay is then removed, without producing the least pain; and finally, the cavity, being perfectly clean, is filled with an efficient stopping. By this simple, yet invariably successful, mode of treatment, the tooth, which was, in the first instance, excessively painful, is rendered *permanently useful and comfortable*.

This valuable operation, it will be observed, comprises three stages—first, *the subsidence of pain*; second, *the entire removal of decay*; and, third,

the solid impaction of the stopping. Its success depends, of course, upon the proper performance of each.

From what has been said, it will be apparent, that all attempts to *stop one's own teeth* with any of the injurious compounds constantly advertised must be utterly futile, and productive of the most mischievous results to the teeth to which they are unfortunately applied, *assuredly* ending, either in their quick destruction, or premature extraction.

The *other* kind of toothache arises

from *inflammation of the membranes investing the root of a tooth and its socket*, which thus become thickened, and cause the tooth to be slightly protruded; in closing the mouth, it therefore strikes its antagonist *before* the others meet, occasioning thereby severe and exquisite pain, which (in addition to the scarcely intermittent one of a dull, throbbing description, together with swelling and tenderness of the gums, termed *gum-boil*) renders the complaint most agonizing. It is generally the result of catching cold, sitting in a draught, a disordered state

of the stomach, or the teeth forcibly striking some hard substance. It may usually be remedied, in its early stage, by applying two or three leeches (with a leech-glass) to the gums round the affected tooth, at the same time taking a small aperient dose, and observing the ordinary precautions against draughts and damp. But, if a gum-boil is forming, a poultice of salt, moistened with vinegar and laudanum, should be repeatedly held to the swollen side of the face, *externally*, as hot as can be borne; and when the gum-boil has formed, it may be punc-

tured with a lancet, after which, pain will cease.

Should these remedies, however, be unsuccessful, as in some cases happens, there is no alternative but to resort to the radical cure of extraction.

The next part of my subject refers to—

TARTAR, ITS BAD EFFECTS UPON

THE TEETH AND GUMS.

SALIVARY Calculus, or Tartar, is an earthy deposit, which accumulates to a greater or less extent upon the teeth of all persons. It varies in kind,

colour, and density, according to different constitutions. It is, at first, deposited upon the necks of the teeth, and edge of the gums; if permitted to remain, it becomes hard, and induces a still further accretion, which goes on in every direction, upwards and downwards, clogging up the divisions between the teeth, inserting itself *under* the gums, which *recede* as its quantity increases, and destroying simultaneously the sockets which contain the roots of the teeth.

Its bad effects are, a disagreeable taste in the mouth, a most offensive

fœtor of the breath, inflammation and absorption of the gums and sockets, followed by loosening and loss of the teeth, which, curiously enough, are almost always free from decay. Now, all these many sad and evil consequences may be both prevented and counteracted, by having the teeth *occasionally* "scaled," (a painless and harmless operation,) by which all this destructive and disfiguring concretion is removed, and the teeth, gums, and sockets, restored to a healthy condition, in which state they will continue, by receiving proper attention — such as

brushing them well and regularly, and by the adoption of some one or other of the tooth-powders and tinctures before named.

Some persons have a strange antipathy to this simple process of having the teeth "*scaled*," imagining that thereby they will be loosened. The fallacy of such suppositions will now be evident, since it has been demonstrated that the *very opposite* is the effect intended and attained.

I further beg my reader's attention whilst I describe—

THE ADVANTAGES OF ARTIFICIAL TEETH.

WHEN it is considered of what value and importance the teeth are in reference to *health and comfort, articulation of speech, and personal appearance*, it is no wonder that their loss (which takes place at all ages) is regarded as a grievous calamity. Happily, however, such loss is not irremediable. The dental art, in the present day, is capable of furnishing *substitutes* (from one to a whole

set) so exactly resembling those that nature gave, in shape, colour, and every other characteristic, and so entirely fulfilling their purposes, that a critical observer is unable to detect the difference: at the same time, restoring the health, masticatory powers, distinctness of enunciation, and juvenility of appearance, in a manner as surprising as it is certain.

But the dental art is competent to effect still greater improvements: it can not only insert artificial teeth in the places of those that are lost with a perfection which is truly astonishing,

but it can also *renew* the want of substance occasioned by the absorption, or destruction, of their sockets, which is often very considerable.

Moreover, in some persons there exists a natural deformity, in which the *lower* front teeth close *over* the upper, (whereas the reverse should be the case.) This gives to the chin undue prominence, and constitutes what is termed "*being underhung*." When such teeth are lost, art can triumph over the defects of nature in an extraordinary manner, because it can give to the artificial teeth

for the *upper* jaw any desired fulness, to enable them to close *over* those of the under, and thus impart to the countenance an aspect so becoming, and so contrary to that which it formerly wore, that the individual is hardly to be recognised.

But artificial teeth, to achieve such important and valuable results, must be constructed with the exactest nicety of perfection, and skilfully adapted with the most accurate adjustment in *every* respect. Each mouth demands a different mode of treatment, and unless all the minutiae be most carefully

attended to, the teeth can neither be useful, comfortable, nor ornamental.

The sole reason that persons do not derive all these advantages from artificial teeth is, that some one or more errors have been committed in their construction; for it may be unhesitatingly asserted, that there is scarcely a mouth to be met which cannot be supplied with artificial teeth capable of bestowing upon the wearer all the benefits that have just been described.

But it unfortunately happens that this branch of the dental art, espe-

cially, is made the subject of quackish pretension and gross imposition — as many persons have found, and still find, to their cost and annoyance, by allowing themselves to be deceived by the delusive impossibilities of fictitious announcements. No arguments are necessary to prove that a remunerative scale of fees must be maintained to enable the practitioner to do justice to his patient, in the performance of the many invaluable and intricate operations pertaining to his art, and in none more so than the skilful adjustment of artificial teeth,

which, if composed of the best materials, are *intrinsically* expensive.

Many persons are under the impression that they cannot have artificial teeth supplied without undergoing much pain. The process, on the contrary, is one of the greatest simplicity, as far as the patient is concerned. Such a presumption must have arisen from the circumstance that, in some few instances, it is desirable *previous* to the insertion of artificial teeth, to extract *loose* teeth, or their roots, the *removal* of which is of more consequence than their presence. I would

have it understood, however, that such a course is only advised, never insisted upon; but if they are firm and healthy it is preferable to let them remain, merely reducing them to a *level* with the gums, the fulness of which they help to support; while, at the same time, they afford an excellent and solid basis for the adaptation of the artificial teeth.

It is to be hoped that, from a perusal of the preceding facts, those who have not hitherto experienced the advantages of wearing artificial teeth, will feel induced to do so, and

thus become partakers of the many benefits and enjoyments they are capable of imparting.

Forming a portion of the mouth and intimately connected with the teeth, I will notice, finally—

THE DEFECTS OF THE PALATE, AND
THEIR REMEDIES.

THE palate, like other parts of the body, is liable to malformation and disease.

In some cases, it is the result of imperfect development; in others, a

vitiated state of the system. Sometimes the defect includes the entire palatal vault and soft parts beyond; at others, it consists of a perforation of the palate only. In both cases, and particularly in the former, distinctness of utterance is very much impaired, and mastication and deglutition are performed with difficulty.

These defects are sometimes remedied by a surgical operation; but more frequently the dentist is called upon to supply the deficiency with an artificial substitute, which requires the most accurate adjustment to the sur-

rounding parts. Such a contrivance, when properly constructed and well adapted, will so improve the different functions, that it renders the sad and unpleasant effects resulting from their imperfection scarcely perceptible.

In conclusion, I express the hope that this little work has deserved its title of *information* on the teeth. Its object, however, will not be complete unless it be the means of conferring substantial and permanent benefit upon its readers.

THE END.

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